JOE SERNA, JR. FARMWORKER HOUSING GRANT PROGRAM

Department of Housing and Community Development P.O. Box 952054 Sacramento, CA 94252-2054 (916) 324-0695

JSJFWHG USE ONLY
Application No
Date Received
Reviewer

APPLICATION

		12	11210111011		
l.	APP	LICANT/SPONSOR			
	A.	Name: Address: Contact Person: Ext Fa E-mail Address: Ext Fa	ax Number	Nonprofit C Limited Par Cooperative Other:	Corporation rtnership e
		Payee (Vendor) ID#:			
	В.	Legislative District of Applicant Assembly District Senate District		of Project Assembly District Senate District	
	C:	Consultant (if applicable) Name: _ Address: Contact Person: Fax Number:		Telephone:	Ext.
II.	PRC	DJECT/DESIGN INFORMATION			
	A.	Name of Development:			
	B.	Location (Address):			
	C.	Activity	Amount Requ	uested	
		Predevelopment	\$		Square Footage
		Homeownership No. of Assisted Units:	\$ \$	New Construction Rehabilitation	
		Rental No. of Assisted Units: ALL rental project applicants must fully Complete Addendum "A".	\$ \$	New Construction Rehabilitation	
		Cooperative No. of Assisted Units:	\$ \$	New Construction Rehabilitation	
		TOTAL AMOUNT REQUESTED \$_ MATCHING SHARE \$_		See III-C.	

II.	D.	JECT/DESIGN INFORMATION (continued) Type of housing proposed:
	Б.	Townhouse Single Family Condominium Duplex/Triplex Apartment Manufactured Housing Other
	E.	Provide a summary of the proposed project including recent history of events in the selection of this site and describe in detail the proposed work scope. (Exhibit F)
	F.	How do you propose to assist agricultural households, including those of low-income and very low-income?
	G.	Describe your organization's capacity to undertake this project. (Exhibits A, B, C, D, E, I & J)

II. PROJECT/DESIGN INFORMATION (continued)

H. Non-Profit applicants must submit a statement demonstrating their broad-based organization and how their board membership reflects a variety of interests in the community where the development will be located. Provide a copy of the latest board meeting minutes. (Include as a part of Exhibit C.)

I. Describe your project's feasibility and potential obstacle's to that feasibility. How will you overcome those obstacles?

J. In narrative form, describe the terms and conditions of funding, other than HCD, that is being proposed and the current status of such funding. Provide information on total development costs per unit and per square foot. Attach letters of commitment or applications for administrative funding (Exhibit H), construction/interim financing (Exhibit K), and for permanent financing (Exhibit L). **Disclose any current or anticipated pre-development loans.**

II. PROJECT/DESIGN INFORMATION (continued)

K. List any Innovative or Other Special Features and/or Amenities, including any energy-efficient design or materials, which are planned for the project.

L. If this is a rental project, describe the project ownership structure, including any anticipated changes during the course of the development. If there are multiple partners of affiliated organizations, explain the role of each, including the initial Limited Partner. (Attachments AA – EE)

M. List any program or financial assistance that you have received from HCD during the past five years. Include dates, amounts and a contact person for each program. Describe any unresolved issues or adverse action taken by HCD in the last five years. Briefly outline your progress on any outstanding loan or grant.

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II.	PROJECT/DESIGN INFORMATION ((continued)

N. Describe other housing projects that you have developed in the last five years, including financing details.

III. ESTIMATED DEVELOPMENT COSTS

A. Sources and Uses – Acquisition; Predevelopment

PROPOSED SOURCES AND USES PRE-DEVELOPMENT PHASE

OWNER'S LENDER #1 LENDER #2 CONTRIBUTION USES **FWHG** HCD #2 **TOTAL** Land Acquisition Soils report Engineering Architecture Legal - Real Estate Accounting Appraisal **Application Fees** Permits & Other Fees Other TOTAL

	Proposed lenders during pre-development and lie	en position	Proposed Lien Position
FWHG		\$	
HCD# 2		\$	
Lender # 1		\$	
Lender # 2		\$	
Owner's Contribution		\$	
	Total	\$	

III. ESTIMATED DEVELOPMENT COSTS (continued)

B. Sources and Uses - Construction

PROPOSED SOURCES AND USES CONSTRUCTION PHASE

						OWNER'S	1
USES	FWHG	HCD #2	LENDER #1	LENDER #2	LENDER #3	CONTRIBUTION	TOTAL
<u> </u>	1 11110	HCD #2	EEROER #1	EEI (DEIC II 2	DEI (DEI (113	CONTRIBUTION	TOTAL
Payoff Pre-Development							
Land Acquisition							
Permits & Other Fees							
Off-site Improvements							
Site Improvements							
Construction							
Contingency							
Engineering							
Architecture							
Legal – Real Estate							
Accounting							
Construction Interest							
Other							
Other							
TOTAL							

Proposed lenders d	luring construction and Lien Position	Proposed Lien Position
FWHG	\$	
HCD # 2	<u> </u>	
Lender # 1	<u> </u>	
Lender # 2	<u> </u>	
Lender # 3	<u> </u>	
Owner's Contribution	<u> </u>	
	Total \$	

III. ESTIMATED DEVELOPMENT COSTS (continued)

C. Sources and Uses – Permanent Financing and Closing Fees

		PROPOSED SOURCES AND USES					
_		PERMA	PERMANENT FINANCING AND CLOSING FEES				
						OWNER'S	
USES	FWHG	HCD #2	LENDER #1	LENDER #2	LENDER #3	CONTRIBUTION	TOTAL
Pay Const/ Loan # 1							
Pay Const/ Loan # 2							
Pay Const/ Loan # 3							
Pay Const/ Loan # 4							
Pay HCD Const. Loan							
Rollover Equity							
Rollover FWHG funds							
Syndication Fees							
Permanent Loan Fees							
Developer Fee							
Vacancy Reserve							
Replacement Reserve							
Audit							
TOTAL				_			

	Proposed l	enders for permanent finance and Lien	Position	Proposed Lien Position
FWH	G		\$	
HCD#	2		\$	
Lender #	1		\$	
Lender #	2		\$	
Lender #	3		\$	
Owner's Contribution/Equi	ty		\$	
		Grand Total Permanent Finance Less FWHG Funds Equals Match	\$ \$ \$	=
Total Number of Units		_		
Total Cost per Unit	\$	_		
Total per Square Foot	\$	_		
Number of Assisted Units Average FWHG cost per		_		
assisted unit	\$	_		

FOR HOME OWNERSHIP PROJECT:

D.	Are you planning to implement resale res	rictions and/or equity sharing deeds of tru	st and/or
	promissory notes? \square Yes (Exhibit M)	\square No	
	If yes, indicate lien position # above.		

IV. MARKET AND FAMILY AFFORDABILITY DATA

Utilities

Fees (if applicable)

A. Summarize the market study or other market data which demonstrates the need for <u>farmworker</u> housing and the ability of local farmworkers to pay for the proposed housing.

В.	Number of farmworker families to be served:	
C.	Target income range to be served: \$	
D.	County Median Income \$	
E.	Average family housing payment levels:	
	 Assisted (for families to be housed in units constructed with assistance from FWHG Program and to be identified as "assisted units.") Rents/Mortgages Taxes/Insurance 	the

HOMEOWNERSHIP

Unit Size	Proposed	Proposed 1st	FWHG	Other
	Sales Price	Mortgage	Assistance	Assistance
2-Bedroom				
3-Bedroom				
4-Bedroom				
5-Bedroom				

TOTAL

RENTAL PROJECT UNITS

	Proposed	Proposed	Proposed	Locai
Apartment	Very-Low Rent	Low Rent	Moderate	Fair Market
Size	< 50%	< 80%	> 80%	
1-Bedroom				
2-Bedroom				
3-Bedroom				
4-Bedroom				

IV.	MARI	MARKET AND FAMILY AFFORDABILITY DATA (continued)		
		 Local Area Market Rates Rents/Mortgages Taxes/Insurance Utilities Fees (if applicable) TOTAL 		
	F.	Target percent of income for housing cost: from% to%		
	G.	Estimated grant required per unit: Rental \$ Homeownership \$		
V.	RELC	OCATION		
	Is the	proposed site currently occupied?		
	If yes,	answer the following:		
	A.	What is the current plan for disposition of the structures?		
	B.	Have you developed a relocation plan? Yes, Exhibit O No		
VI.	SITE			
	A.	Present Owner		
		Name: Telephone:		
		Address:		
	B.	Site Control - check one:		
		☐ Site owned by Applicant (Exhibit P) ☐ Option/Purchase agreement obtained (Exhibit Q) Expiration date of Option/Purchase agreement ☐ Other:		
	C.	Approval by Lender - check one:		
		☐ Site has been approved by Lender (Exhibit R). ☐ Site has not been approved by Lender. Status of approval process is:		

Ί.	SITE			
	D.	Special Hazards/Utilities 1. Has soils report been obtained		
		2. Is property in a flood plain? Yes No If yes, explain design features that will mitigate this potential hazard:		
		3. Are utilities, water and sewer services now available for this site? Yes No If not, explain how you will obtain these services:		
	E.	Assessor's Block and Parcel Number:		
	F.	Size: acres Density: units/acre		
	G.	Enclose site map (Exhibit T).		
	H.	Enclose current preliminary title report (Exhibit U). Date of report:		
	I.	Enclose most recent appraisal or other cost data (Exhibit V). Date of data:		
II.	LOCA	AL APPROVALS		
	A.	Zoning		
		Is the site presently zoned for the proposed use?		
		Yes, zoning is		
		No, zoning is		
	B.	Subdivision (answer for homeownership and cooperative projects only).		
		Does this project have subdivision approval? Yes No		
		If yes: Tentative map approval obtained, submit as Exhibit W. Final map approval obtained, submit as Exhibit X. Dept. of Real Estate - Subdivision public report, submit as Exhibit Y.		

VII.	LOC	AL APPROVALS (continued)			
		If no, what is current status?			
	C.	Opposition/Obstacles (Identify known opposition or obstacles to this project):			
	D.	FOR ALL TYPES OF APPLICANTS (Rental Projects):			
		If more than 49% of rental units are to be restricted to low-income tenants, how will you comply with the requirements of Article XXXIV of the State Constitution. Provide any relevant documentation as Exhibit "Z".			
VIII.	ANT	ICIPATED COMPLETION SCHEDULE			
	A.	Permanent financing commitments will be obtained by:			
	B.	Site option will expire on:			
	C.	Title will transfer by:			
	D.	Site development will begin by:			
	Е.	Unit construction will begin by:			
	F.	Construction will be completed by:			
	G.	Full occupancy will be accomplished by:			

APPLICATION AUTHORIZATION

A.	THIS APPLICATION WAS PREPARED I	BY:	
	(Name)		(Title)
	(Signature)	Date:	Phone:
B.	THIS APPLICATION SUBMITTAL IS AU	THORIZED BY:	
are f Hou ackr may	e certify that the information and statements true, accurate and complete to the best of a sing and Community Development to verify nowledge and understand that if facts and/o constitute grounds for rejection of the apprising Program grant for which the application	my/our knowledge. y any information por information here olication, or default	I/We authorize the Department opertaining to this application. I/We in is found to be misrepresented, i
	(Name)		(Title)
	(Signature)	Date:	Phone:

EXHIBIT CHECK LIST "A"

NOTE: Please separate and tab Exhibits.

EXHIBIT ITEM	NAME OF EXHIBIT	APPLICATION SECTION #	(FWHG use only) RECEIVED
Addendum	Addendum to the JSJFWHG Application "Rental Project Only"		
Α	A copy of the articles of incorporation of the corporation, or in the case of a public agency other than a city or county, its authorizing resolution.	II -G	
В	A current copy of the by-laws of the corporation, cooperative, or the governing body of the public agency.	II-G	
С	A list of the board of directors of the corporation, cooperative, or the governing body of the public agency.	II-G & H	
D	A recent financial statement of the applicant organization including a balance sheet and income statement (not required from public entities)	II-G	
Е	Board resolution authorizing a grant application and contract.	II-G	
F	Schematic Plans - Include name and telephone number of architect and indicate status of design approvals.	II-E	
G	Schedule of sale and/or rental prices	IV-E	
Н	Letter of commitment or application for administration funding	II-J	
I	Certificate of Status*	II-G	
J	Statement of Officers*	II-G	
K	Letter of commitment or application for construction/ interim financing	II-J	
L	Letter of commitment or application for permanent financing	II-J	
M	Resale restrictions and/or equity sharing	III-D	
N	Market study	IV-A	
O	Relocation plan	V-B	
P	Grant deed	VI-B	
Q	Option or Purchase Agreement	VI-B	
R	Site approval letter from lender	VI-C	
S	Soils report	VI-D	
T	Site map	VI-G	
U	Preliminary title report	VI-H	
V	Appraisal or other cost data	VI-I	
W	Tentative map approval	VII-B	
X	Final map approval	VII-B	
Y	Subdivision public report	VII-B	
Z	Article XXXIV Documentation	VII-E	

^{*}May be obtained from the office of the Secretary of State.

EXHIBIT CHECK LIST "B"

NOTE: Please separate and tab Exhibits.

EXHIBIT ITEM	NAME OF EXHIBIT	APPLICATION SECTION #	(FWHG use only) RECEIVED
AA	Certificate of Limited Partnership (LP1)	II-L	
ВВ	Loan Authorization	II-L	
CC	Partnership Agreement (executed) <u>Projections</u> including all parts	II-L	
DD	Organization Documents from partnership's GP	II-L	
EE	Certificate of Partnership Standing	II-L	

JSJFWHG Application

Exhibit 1

(Sponsor Letterhead) (SAMPE) RESOLUTION NO._____

The		of
(Board o	f Director/Commissioners/etc.)	_ of (Name of Agency/Corporation)
OBLIGATION A THERETO, ANI	AND INDEBTEDNESS, THE EXE O THE EXECUTION OF OTHER I THE JOE SERNA, JR. FARMWO	OF AN APPLICATION, THE INCURRING OF AN CUTION OF CONTRACTS AND ANY AMENDMENTS DOCUMENTS NECESSARY TO SECURE A GRANT OF RKER HOUSING GRANT PROGRAM OF THE STATE
of Housing and Chousing for farm	Community Development ("State") workers in California; and <u>/corporation_name</u>) organized und	ifornia Health and Safety Code, the California Department is authorized to make grants for the production of assisted er the laws of California, is empowered and eligible to
WHEREAS the	(insert: Agency/Corporation name)	wishes to provide assisted housing for farmworkers;
individual) to a housing and/or or project is known IT IS FURTHER authorizes (insertion amendments there or security instru	appear and submit an application ther related facilities ("Project") get as: (insert: name(s) of project) RESOLVED THAT upon approver: name(s) of individual) reto, a Lien Agreement and any amements required to secure an indebt	to the State for the development and/or rehabilitation of herally located at: (insert: address/location), which all of said application by the State, the Agency/Corporation to execute and sign a Standard Agreement and any endments or modification thereto, and any other documents edness for the above-described project, which indebtedness
	the amount approved by the State.	
PASSED AND A	ADOPTED THIS day of	_, 20, by the following vote:
AYES:	NAYS: ABSTA	IN: ABSENT:
	l certify that the foregoing is a tru	Secretary of the (insert: Agency/Corporation name) does e and full copy of a resolution of the Board of Directors bove-mentioned, which has not been altered, amended or
Date	Secretary (Signature)	Name (type or print)
AP-102 (10/10/0	0)	

Filename: Application 2002NOFA

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